

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-S ITA	866 1113	04.18.01 11-09-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
*	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
1	11/01
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

10/16/01